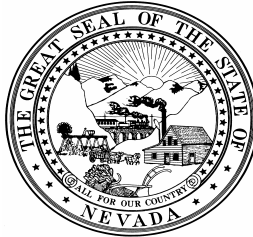


**Nevada Department of Education
TEACHER LICENSING OFFICE
APPLICATION FOR DUPLICATE LICENSE**

Carson City Office

700 E. Fifth Street, Suite 105
Carson City, Nevada 89701-5096
Phone: (775)687-9115
Fax: (775)687-9101



Las Vegas Office

1820 E. Sahara, Suite 205
Las Vegas, Nevada 89104-3746
Phone: (702) 486-6458
Fax: (702) 486-6450

Social Security #: _____ Phone Number: _____

Last Name: _____, First Name: _____ MI: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Signature: _____ Date: _____

There is a \$10.00 fee for each duplicate license. Please make the check or money order payable to the Nevada Department of Education (No cash please). It will take approximately two to three weeks to get your duplicate license.

For Office Use Only

Date Printed:

Date Mailed:

By: